Docket No.:

APPLICATION FOR UNITED STATES PATENT **DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

vento
:
able).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed by me or my legal representatives or assigns within one year prior to this application are hereby claimed:

Japanese Patent Application No. 2002-333287 filed on November 18, 2002

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s):

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:

> James A. Oliff, Reg. No. 27,075; William P. Berridge, Reg. No. 30,024; Kirk M. Hudson, Reg. No. 27,562; Thomas J. Pardini, Reg. No. 30,411; Edward P. Walker, Reg. No. 31,450; Robert A. Miller, Reg. No. 32,771; Mario A. Costantino, Reg. No. 33,565; and Stephen J. Roe, Registration No. 34,463.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Typewritten Full Nan of First or Sole Inven		Osamu		Fukawatase
**Inventor's Signature	:	Given Name Middle Initial		Family Name Fukawata se
**Date of Signature:		October	15	2003
Residence:	Nishika	Month mo-gun	Day Aichi-ken	Year Japan
Citizenship:	Ci- Japanese	ty	State or Province	Country
	Post Office Address: (Insert complete	c/o TOYOTA JIDOS	HA KABUSHIKI KAISHA	
	mailing address, including country)	1, Toyota-cho, Toyota	ı-shi, Aichi-ken 471-8571, Ja	pan

^{**}Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

PAGE 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

1	Typewritten Full Nan	ne			
	of Second Joint Inver	ntor (if any)	Takeaki		Kato
			Given Name	Middle Initial	Family Name
2	**Inventor's Signature	e:	- Jakeaki		Fato
3	**Date of Signature:	Oc	tober	15	2003
			Month	Day	Year
	Residence:	Nishikamo	o-gun	Aichi-ken	Japan
		City		State or Province	Country
	Citizenship:	Japanese			
		Post Office Address: (Insert complete mailing address,	c/o TOYOTA JIDOS	HA KABUSHIKI KAISHA	4
		including country)	1, Toyota-cho, Toyot	a-shi, Aichi-ken 471-8571,	Japan
1	Typewritten Full Nan	ne			
	of Third Joint Invent	or (if any)			
•	****		Given Name	Middle Initial	Family Name
2	**Inventor's Signature				
3	**Date of Signature:				
		Month		Day	Year
	Residence:	<u> </u>			
		City		State or Province	Country
	Citizenship:	Japanese			
		Post Office Address: (Insert complete mailing address, including country)			
1	Typewritten Full Nan				
•	of Fourth Joint Inven				
			Given Name	Middle Initial	Family Name
2	**Inventor's Signature	: :	Given Ivania	Wildele Milital	1 anniy Ivanic
3	-				
3	**Date of Signature:		Month	Day	Year
			14101IIII	Day	·
	Residence:	City		State on Decision	Country
	Citizenship:	City		State or Province	Country
	Citizensinp.	Japanese	-		
		Post Office Address:			
		(Insert complete mailing address,			
		including country)			
1	Typewritten Full Nan	ne			
	of Fifth Joint Invento				
			Given Name	Middle Initial	Family Name
2	**Inventor's Signature				
2	**Date of Signature:				
3	Date of Signature.		Month	Day	Year
	Residence:		Mondi	Day	i cai
	vendence:	City		State or Province	Country
	Citizanahia	_	•	Omic Of Forfile	Country
	Citizenship:	Japanese			
	Post Office	ce Address: (Insert complete			
		mailing address,			
		including country)			

^{**}Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.